NO. OF COMES FECSIVED		5	
DISTRIBUTION		1	
SANTA FE		1]
FILE		1	-
U.S.G.S.		Ĺ	
LAND OFFICE			
IRANSPORTER	OIL	1	
	GAS	1	İ
OPERATOR		1	
PHORATION OFFICE		l	
Operato:			
El Paso Nat	ural (Gas	Co
Acries			

Petroleum Engineer

January 17, 1973

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NEW MEXICO OIL CONSERVATION COMMISSION Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS mpany PO Box 990, Farmington, NM 87401 Other (Please explain) Reuson(s) for tiling (Check proper box) Change in Transporter of: New Well OII Dry Gas Recompletion Change in Ownership Casinghead Gas If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation Kind of Lease SF 079266 So. Blanco Pictured Cliffs State (Federal or Fee 18 Vaughn Location 990 West North Line and 1090 Feet From The Feet From The_ Unit Letter Rio Arriba 6W County 26N , NMPM, 29 Township Range Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Cit | or Condensate | X | Address (Give address to which approved copy of this form is to be sent)
PO Box 990, Farmington, NM 87401 El Paso Natural Gas Company Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas X PO Box 990, Farmington, NM 87401 El Paso Natural Gas Company Is gas actually connected? Twp. If well produces oil or liquids, give location of tanks. 29 26N: D If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Resty. Diff. Resty. Plug Back Deepen Cil Well New Well Gas Well Workover Designate Type of Completion - (X) X P.B.T.D. Date Compl. Ready to Prod Total Depth Date Spudded 3066' 3077' 1-5-73 10-14-72 Tubing Depth Top Oxi/Gas Pay Name of Producing Formation Elevations (DF, KKB, RT, GR, etc., tubingless 2980' Pictured Cliffs 6754'GL 3077' 2980-2995 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE 9 5/8" 2 7/8" 142 cu. ft. 13 3/4" 405 cu.ft. 8 3/4" & 6 3/4 3077' tubingless (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Cil Run To Tanks Casina Pressure Tubing Pressure Length of Test Water - Bbls. Oil-Bhis. Actual Prod. During Test JAN 24 1973 OIL CON. COM. GAS WELL evity Distadadeate Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D 3 hours 1564 Casing Pressure (5hut-in) Choke Size Tubing Pressure (Shut-in) esting Method (putot, back pr.) 3/4" tubingless Calc. AOF OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE MAR 1 9 1973 .. 19 _ APPROVED. I hereby certify that the rules and regulations of the Oil Conservation Commusion have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Original Signed by A. R. Kendrick PETROLEUM ENGINEER DIST. NO. TITLE . This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened (Signature)

well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.